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OMB APPROVAL

1260221

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Roll over options to acquire common stock and deferred compensation plan interests of TD Holding Corporation □ Rule 506 ULOE Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 Section 4(6) Type of Filing: New Filing ☐ Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) TD Holding Corporation Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 26380 Curtiss Wright Pkwy, Richmond Heights, Ohio 44143 (216) 289-4939 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Parent corporation of TransDigm Holding Company and TransDigm Inc. Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month Year 03 Actual Actual or Estimated Date of Incorporation or Organization: 7 Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE CN for Canada; FN for foreign jurisdiction)

## **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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· Each promoter of the issuer, if the issuer has been organized within the past five years;								
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;								
· Each executive officer and director of corporate issuers an	d of corporate general and	managing partn	ers of partnership issuers; and					
· Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Warburg Pincus Private Equity VIII, L.P.								
Business or Residence Address (Number and Street, City, State, Zip	Code)							
466 Lexington Avenue, New York, NY 10017								
Check Box(es) that Apply: Promoter Beneficial Owner		☑ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if individual)								
Howley, W. Nicholas								
Business or Residence Address (Number and Street, City, State, Zip	•							
26380 Curtiss Wright Pkwy, Richmond Heights, Ohio 44143								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, if individual)		<u> </u>						
Rufus, Gregory								
Business or Residence Address (Number and Street, City, State, Zip	•							
26380 Curtiss Wright Pkwy, Richmond Heights, Ohio 44143	3							
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner					
Full Name (Last name first, if individual)								
Barr, David A.								
Business or Residence Address (Number and Street, City, State, Zip	Code)							
466 Lexington Avenue, New York, NY 10017								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner					
Full Name (Last name first, if individual) Graff, Michael								
Business or Residence Address (Number and Street, City, State, Zip 466 Lexington Avenue, New York, NY 10017	Code)	<u></u>						
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner					
Full Name (Last name first, if individual) Kruse, Kevin		· · · · · · · · · · · · · · · · · · ·						
Business or Residence Address (Number and Street, City, State, Zip Code) 466 Lexington Avenue, New York, NY 10017								
Check Box(es) that Apply:  Promoter Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner					
Full Name (Last name first, if individual) Lee, Kewsong								
Business or Residence Address (Number and Street, City, State, Zip Code) 466 Lexington Avenue, New York, NY 10017								
(Lice blank sheet or convende	use additional coming of this	shoot or noon						

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

		A. BASIC I	DENTIFICATION DATA	A				
2. Enter the information requeste	2. Enter the information requested for the following:							
· Each promoter of the issu	· Each promoter of the issuer, if the issuer has been organized within the past five years;							
<ul> <li>Each beneficial owner hat the issuer;</li> </ul>	aving the power	to vote or dispose,	or direct the vote or disp	osition, of, 10%	or more of a class of equity securities of			
· Each executive officer ar	nd director of co	rporate issuers and	of corporate general and	managing partne	ers of partnership issuers; and			
· Each general and manage								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first, if indi	vidual)							
Peacock, Douglas W.								
Business or Residence Address (N			Code)					
466 Lexington Avenue, New Y								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if indi	vidual)							
Business or Residence Address (N	umber and Stree	et, City, State, Zip (	Code)	• • • • • • • • • • • • • • • • • • • •				
Check Box(es) that Apply:	Promoter B	Seneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if indi	vidual)							
Business or Residence Address (N	umber and Stree	et, City, State, Zip (	Code)					
Check Box(es) that Apply:	Promoter B	Seneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if indi	vidual)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Business or Residence Address (N	umber and Stree	et, City, State, Zip	Code)					
Check Box(es) that Apply:	Promoter B	eneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if indi	vidual)							
Business or Residence Address (N	umber and Stree	et, City, State, Zip (	Code)					
Check Box(es) that Apply:	Promoter B	eneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if indi	vidual)	·	•					
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply:	romoter 🔲 B	eneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if indi-	vidual)							
Business or Residence Address (N	Business or Residence Address (Number and Street, City, State, Zip Code)							
	(Use blank sh	eet, or copy and use	e additional copies of this	sheet, as necess	ary.)			

B. INFORMATION ABOUT OFFERING															
1.	Has the issue	er sold, or	does the is	suer inten	d to sell, to	non-accre	edited inve	stors in th	is offering	?				Yes	No
Answer also in Appendix, Column 2, if filing under ULOE.									Ь						
2.								\$ <u>N/A</u>							
					_	-								Yes	No ⊠
	remuneration person or ag	n for solice	itation of proker or de	ourchasers ealer regist	in connectered with	tion with the SEC a	sales of se nd/or with	curities in a state or	the offerin	ng. If a pet t the name	erson to be of the bro	e listed is a oker or dea	on or similar an associated aler. If more nat broker or		
Full	Name (Last r	name first,	if individu	ıal)											
Busi	ness or Resid	ence Addı	ress (Numl	ber and Str	reet, City,	State, Zip	Code)						······································		
Nam	e of Associat	ed Broker	or Dealer			<u></u>									
State	s in Which P	erson List	ed Has So	licited or I	ntends to S	Solicit Pure	chasers								
	(Check	"All State	s" or chec	k individu:	al States)									🔲 All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	Name (Last r	ame first,													
Busi	ness or Resid	ence Addı	ress (Numl	ber and Str	eet, City,	State, Zip	Code)								
Nam	e of Associat	ed Broker	or Dealer							.,					
State	s in Which P	erson List	ed Has Sol	licited or I	ntends to S	Solicit Purc	chasers								
(Check "All States" or check individual States)								🔲 All	States						
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	Name (Last n	ame first,	if individu	ial)											
Busia	ness or Resid	ence Addr	ess (Numb	per and Str	eet, City,	State, Zip (	Code)							444	
Nam	e of Associat	ed Broker	or Dealer		······································					· · · · · · · · · · · · · · · · · · ·					
State	s in Which P	erson Liste	ed Has Sol	licited or I	ntends to S	Solicit Purc	hasers								<del></del>
(Check "All States" or check individual States)							🗌 All	States							
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<u> </u>	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE	S AN	D USE OF PROCEE	DS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	•	9	8
	Equity	\$		9	
	Common Preferred	·			
	Convertible Securities (including warrants)	\$	35,697,779*	Ş	35,697,779*
	Partnership Interests	Ψ	33,031,113	5	
	Tartifolish interess	\$			,
	Other (Specify)	Φ.		,	,
		\$_			3
	TotalAnswer also in Appendix, Column 3, if filing Under ULOE	\$_	35,697,779*	3	35,697,779*
	,				
	* Amount represents the total net value of the fully vested options to acquire the common stock and deferred compensation plan interests of TD Holding Corporation received by certain security holders of TransDigm Holding Company as consideration for their roll over of options to acquire the common stock of TransDigm Holding Company.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings Under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		17	9	33,031,164*
	Non-accredited Investors				2,666,615*
	Total (for filings Under Rule 504 only)				
	Answer also in Appendix, Column 4 if filing under ULOE				
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering		Type of		Dollar Amount
			Security		Sold
	Rule 505			9	<u> </u>
	Regulation A			9	S
	Rule 504			\$	
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		Г	] §	J
	Printing and Engraving Costs				
	Legal Fees		·		150,000
	Accounting Fees		<del>_</del>		
	Engineering Fees		<del></del>		
	Sales Commissions (Specify finder's fees separately)				
	Other Expenses (identify)			_	
	Total			\$	150,000

	b. Enter the difference between the aggregate offering pr to Part C - Question 1 and total expenses furnished in Question 4.a. This difference is the "adjusted gross proce	response to Part C -		\$ <u>35,547,779</u>			
5.	Indicate below the amount of the adjusted gross proceeds proposed to be used for each of the purposes shown. I purpose is not known, furnish and estimate and check the estimate. The total of the payments listed must equa proceeds to the issuer set forth in response to Part C - Que	f the amount for any box to the left of the	Payments to Officers, Directors, & Affiliates				
	Salaries and fees		<b>\$</b>	\$			
	Purchase of real estate		<b>\$</b>				
	Purchase, rental or leasing and installation of machinery a	and equipment	<b>\$</b>				
	Construction or leading of plant buildings and facilities		<b>\$</b>	🗆 \$			
	Acquisition of other businesses (including the value of involved in this offering that may be used in exchange for securities of another issuer pursuant to a merger)	or the assets	□ \$				
	Repayment of indebtedness		<b>\$</b>				
	Working capital		□ \$	\$			
	Other (specify)		<b>\$</b>	🗆 \$			
	Column Totals  Total Payments Listed (column totals added)		□ \$	\$\\$\_35,547,779			
	D. FEDER	AL SIGNATURE					
follow	suer has duly caused this notice to be signed by the understring signature constitutes an undertaking by the issuer to at of its staff, the information furnished by the issuer to any restriction.	furnish to the U.S. Sec	curities and Exchang	ge Commission, upon written			
	(Print or Type) Solding Corporation	Signature	Date	113/03			
	of Signer (Print or Type) icholas Howley  I	Title of Signer (Print or Type) President, Chief Executive Officer & Chairman of the Board, TD Holding Corporation					
		<b>TENTION</b>					
	Intentional misstatements or omissions of fact con	stitute federal criminal v	violations. (See 18 U.S.	.C. 1001).			